# 19<sup>th</sup> Congressional District Student Internship Application Form Serving Adams, Cumberland, and York Counties

#### **General Information**

First Name	Middle Name	Last Name
Permanent Address		
City	State	Zip
Home Telephone		Other Telephone
E-mail Address		
School Mailing Addres	ss	
City	State	Zip
School Telephone Nun	nber	
Date of Birth	Place of Bi	irth
Parents' or Guardians'	Names	
	re you interested in serving' berland □ York □	
When are you availed ☐ Fall Semester	able for an internship? er □ Spring Semeste	r
If no paid positions voluntary position?		willing to accept an unpaid or

## **School Information**

High School	Grade Average (on a 4.0 scale)*	Graduation Date
High School Address	S	
High School Activiti	ies	
College	Grade Average (on a 4.0 scale)*	Graduation Date
College Address		
College Activities		
* Not including a numerical G	PA will put your application at a disadvantage. Please use the 4.0	scale – that is, A=4, B=3, C=2, D=1, F=0.
Previous Work Ex	xperience	
Employer	Address	Dates
Duties		
Employer	Address	Dates
Duties		
	l attitude and personality. You must have the abite setting. Please check the office equipment and ested below.	
☐Filing Systems ☐Multi-line phone sys ☐Microsoft Word	□ Photocopy machine stem □ Personal computer □ Databases/spreadsheets	□Facsimile Machine □ E-mail/Internet □PageMaker
Others:		

Please state below (in your own handwriting) why you desire a Congressional Internship and provide any additional information that would assist in the selection process.				

# 

Social Security Number

Date

### **Deadlines for application**

Signature

☐ Fall Internsh	ip – Application	deadline is Au	igust 15.
-----------------	------------------	----------------	-----------

- ☐ Spring Internship Application deadline is December 15.
- ☐ Summer Internship Application deadline is January 15.

Please return to: Internship Coordinator

Office of Congressman Todd Platts

2209 East Market Street

York, PA 17402

Please call (717) 600-1919 with any questions.